IN THE SPECIFICATION:

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Please amend paragraph [0001] as indicated below:

[0001] This application claims the benefit of U.S. Provisional Application Serial No. 60/226,901, filed August 23, 2000, and <u>U.S. Patent No. 6,632,228, and</u> incorporates that application those applications herein, in its their entirety, by reference.

Please amend paragraph [0003] as indicated below:

[0003] Medical procedures may be performed by a practitioner through direct contact and interface with a target site as well as through remote access to the target site via medical devices, such as endoscopes, which are designed to extend the practitioner's reach. By extending the practitioner's 's practitioner's reach these devices allow some medical procedures, previously performed only through invasive procedures, to be performed through non-invasive methodologies. One drawback of these extension devices and remote access methodologies is that a practitioner may not be able to watch the procedure being performed and, thus, may not be able to visually determine if the procedure he is performing has been properly completed.

Please amend paragraph [0005] as indicated below:

[0005] If the ligation bands had become entangled during the procedure they could remain on the distal end of the ligation unit and provide notice to the practitioner, upon the endoscope's removal, that the procedure, was procedure was not properly performed. Conversely, if too many bands were deployed during the procedure or if they were deployed in the wrong areas, it would be difficult if not impossible for the practitioner to immediately discern, based on viewing the distal end of the ligation unit, that the bands had been improperly deployed from the endoscope.

Please amend paragraph [0008] as indicated below:

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[0008] FIG. 1 is side is a side perspective view of a removeable string system containing a plurality of strings prior to its insertion into a body in accord with one embodiment of the present invention.

Please amend paragraph [0024] as indicated below:

[0024] FIG. 5 is a side perspective view of an alternative embodiment of the present invention. In FIG. 5 a means a means 50 for affirmatively verifying that at medical appliance from a plurality of medical appliances, has been deployed can be seen. This means 50 may be attached to an endoscope as illustrated in FIG. 6. This means 50 may contain a plunger 52, a body 56, a string 53, and a variable length string passageway 51 and may be used to deploy ligation bands or other medical appliances located at the distal end of an endoscope. This means 50 accomplishes this task by shortening or otherwise pulling on a string contained within the passageway 51 that is coupled to a plurality of deployable medical appliances at the distal end of the endoscope. This string is pulled or shortened by a specific predetermined distance by depressing one of the plungers 52 of the means 50. As the plunger 52 is depressed, the string 53 resident in the passageway 51 and coupled to anchoring point 57 will have its effective length shortened by the distance that it must now travel around the depressed plunger 52. Thus, by depressing the plunger 52, the string will be shortened and a ligation band or other device coupled to the string may be deployed by the medical device.

Please amend paragraph [0025] as indicated below:

[0025] A specific method of using the means 50 from FIG. 5 may include coupling the body 56 to an endoscope and then treading threading a string 53 through the string passageway 51 and anchoring point 57. The distal end of the string 53 may then be threaded around each deployable medical appliance in sequential order. Then, as mentioned above, in order to deploy

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the medical appliance, the plunger 52 may be depressed, in order to draw the string 53 into the valley 58 associated with the plunger 53 thus altering the string's pathway and shortening its effective length. Consequently, when a plunger 52 is depressed, a medical appliance coupled to the string's distal end may be deployed from the distal end of the medical device. If a second medical appliance is to be deployed, a second plunger may be depressed while the first plunger is also depressed. Here, the effective length of the string will be twice shortened and the second medical appliance may be deployed. Likewise a third appliance may also be deployed by depressing the third plunger 52 while the first two are also depressed. The plungers in this embodiment may be depressed in any order to deploy the first, second, and the third medical appliances since the string is not bound underneath the depressed plungers but, is but is, rather, able to slide back and forth underneath the depressed plunger.

Please amend paragraph [0027] as indicated below:

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[0027] An alternative embodiment of a means means 70 for affirmatively verifying that a specific medical appliance from a plurality of appliances has been deployed 70; is illustrated in FIG. 7. This means Means 70 may be placed at the distal end of an endoscope and may be used to pull a string a predetermined distance in order to deploy a ligation band in communication with the string from a ligation tip at the distal end of the endoscope. This means Means 70 may include a shaft 76, an opening 72, and a slidable handle 71 coupled to the shaft 76 and adapted to be slid over the shaft 76. The handle 71 may also contain several slots 78 that may be sized to secure a looped end 75 of a sting string 701 that may be attached to a plurality of ligation bands at the distal end of the endoscope or other device. Consequently, as the handle 71 is incrementally advanced down the shaft 76 the string 701 may be pulled by that same incremental distance as the handle 71 is slid.

Please amend paragraph [0030] as indicated below:

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[0030] Method System, method and apparatus for deploying medical appliances devices from a medical appliance is are provided. While several embodiments of the present invention have been described above other embodiments within the spirit and scope of the present invention are also plausible.